

Class Proposal Application

Thank you for your interest in becoming a contract class instructor through the City of Riverside Parks, Recreation and Community Services Department. We are currently seeking instructors for classes offered June – September, 2006. Contract Classes are currently being offered to citizen's throughout the City of Riverside. These classes enrich the lives of the residents and provide a positive leisure time experience. The Riverside Parks, Recreation and Community Services Department is seeking professionals to teach a variety of classes. All classes will be promoted in/on the following media: Tri-annual Riverside Report (Summer, Fall/Winter, and Spring), public access channel, and city web-page. The Riverside Report is also directly mailed to more than 100,000 Riverside residents. Any other publications will be done by the class instructor and must be approved by the Parks, Recreation and Community Services Department prior to publication.

Please complete all pages of this **Class Proposal Application**. This information will be used if the Class Proposal Application is accepted. The Parks, Recreation and Community Services Department requires that instructors submit a Class Proposal Application for each individual class and level you wish to teach. **Applications will not be accepted after the deadline.** Once your application has been approved, a representative from the Parks, Recreation and Community Services Department, Contract Class section, will contact you to set up an interview appointment.

Please return to:

City of Riverside Parks, Recreation and Community Services Department

Attn.: Erica Green

3936 Chestnut Street

Riverside, CA 92501

(951) 826-2031

(951) 826-2005 - Fax

E-mail – egreen@riversideca.gov

Deadline to Submit Class Proposal Application: Friday., February 24, 2005 – 5:00 p.m.

****Note: Those Class Proposal Applications submitted after the deadline will not be accepted, NO EXCEPTIONS!***

A new proposal will have to be submitted for the Fall 2006 season.

(Please Print or Type)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ () _____ Fax: () _____

**SS#: _____ Tax I.D. #: _____

Email Address: _____

Business License #: _____ Expiration Date: _____

****Required per California State Law DE542.**

Class Information

- I. **Class Title:**
- II. **Class Fee:** \$
- III. **Class Specifics/Information:**

Note: Instructors MUST provide class meeting dates. Those Contract Class Renewal Forms which do not include dates will not be accepted. There will be no exceptions.

If class will be held at a City of Riverside facility, do not schedule classes to be held on the following holidays: *Independence Day (July 4), and Labor Day (September 5)*. If classes will be held at a non-City of Riverside facility (dance studios, karate studios, golf courses, etc.), you must indicate which dates/holidays your facility will be closed.

- A. **Dates of Class:**
June: _____ July: _____
August: _____ September: _____
- B. **Number of class meetings per week: _____ Preferred day(s) of week:**
- C. **Start Time: _____ End Time:**
- D. **Minimum student age: _____ Maximum student age:**
- E. **Minimum number of students: _____ Maximum number of students:**
Note: All contract classes that are held in City of Riverside facilities must have a minimum of 5 participants.
- F. **Gender specific:** ☐ Female ☐ Male ☐ Co-Ed

IV. Insurance and Supplies

- A. **Insurance Information**
Insurance Carrier:
Policy Number: _____ Expiration Date:
- B. **Supplies Needed?** ☐ Yes ☐ No **Supply cost:**
If supply cost, what for?
If yes, please check one that applies:
☐ Provided by instructor and included in course fee.
☐ Supply list provided at registration
(If students must purchase their own supplies, please attach supply list.)
☐ Provided by instructor and not included in course fee

V. Class Course Description (Please limit to 25 words or less.):

- VI. **Facility Needed:** ☐ Pool ☐ Gym ☐ Kitchen
 ☐ Field ☐ Room ☐ Your Own Facility

Name of Facility (If your facility):

Facility Address:

City: _____ St: _____ Zip: _____

If using City of Riverside facility, what is the minimum required space dimensions necessary to conduct your program?:

- VII. **Equipment Needed:** (tables, chairs, mats, electricity, etc.)
Note: *There is no guarantee that equipment is available. Instructor will be notified if equipment is not available.*
Type:

Will you, the instructor, provide this equipment?: ☐ Yes ☐ No

Quantity:

VII. **Instructor Information:**

A: **Experience in designated activity (include years of service):**

B: **Other Related Skills:**

VIII. Please list 3 References

Name _____ Phone Number _____

Address _____ E-Mail Address _____

Name _____ Phone Number _____

Address _____ E-Mail Address _____

Name _____ Phone Number _____

Address _____ E-Mail Address _____

On this _____ day of _____, 2006, I hereby certify that all information provided by the above mentioned business/contractor is accurate and complete.

(Print Name)

Signature

Again, thank you for your interest in conducting contract classes through the City of Riverside Parks, Recreation and Community Services Department. A representative from Contract Classes will contact you within the next couple of weeks.